12-23-5

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DELPHI TECHNOLOGIES, INC.
M/C 480-410-202
PO BOX 5052
TROY, MI 48007

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Susan Grisham (Depositor's name)
Susan Grisham (Signature)
12-21-05 (Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/677,646	09/30/2003	Charles A. Iannone	89190.071003/DP310449	9512

TITLE OF INVENTION: APPARATUS AND METHOD FOR MONITORING AND COMPENSATING FOR VARIATION IN SOLENOID RESISTANCE DURING USE

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	$1400	$300	$1700	01/12/2006

EXAMINER	ART UNIT	CLASS-SUBCLASS
NGHIEM, MICHAEL P	2863	702-065000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).
☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. **Use of a Customer Number is required.**

2. For printing on the patent front page, list
(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.
1 Patrick M. Griffin
2
3

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

12/27/2005 HDEMESS2 00000032 500831 10677646
01 FC:1501 1400.00 DA
02 FC:1504 300.00 DA
03 FC:3001 6.00 DA

(A) NAME OF ASSIGNEE: DELPHI TECHNOLOGIES, INC.
(B) RESIDENCE: (CITY and STATE OR COUNTRY): TROY, MICHIGAN

Please check the appropriate assignee category or categories (will not be printed on the patent) : ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are enclosed:
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☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.
☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature Susan Grisham Date 12-21-05
Typed or printed name Susan Grisham Registration No.

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